



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 105447	PRINTER SN 099.3586.080	DATE OF INSPECTION 11/25/2013
LOCATION OF INSTRUMENT (STREET AND CITY) 405 E 5TH ST CARTHAGE, MO		TIME OF INSPECTION 2:10 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION

☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER REPCO LOT # 13002 EXP. DATE 06/19/2015

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN 1425 SIMULATOR EXP DATE 06/19/2014

☒ CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .098

TEST 2 .099

TEST 3 .099

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

OPERATING IN MODHSS STANDARDS

INSPECTING OFFICER

SIGNATURE

PRINT NAME
SGT. JOHN HICKS

TYPE II PERMIT NUMBER/EXPIRATION DATE
230162 10/12/2015

TELEPHONE NUMBER
(417) 358-8177

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 13002

EXPIRATION DATE: June 19, 2015 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

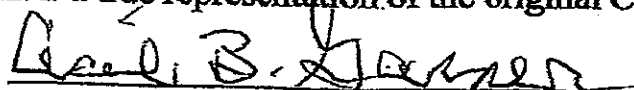
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is June 20, 2013
The expiration date for this lot number is June 19, 2015 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President
RepCo Marketing, Inc.



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT
TYPE II
JOHN B HICKS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**DATAMASTER, INTOXILYZER 8000, ALCO-SENSOR IV
W/PRINTER**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 8/14/2013

NUMBER 230162

EXPIRES 8/14/2015



DIRECTOR OF STATE PUBLIC HEALTH LABORATORY


_____, acting director
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

 **STATE OF MISSOURI**
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.



Operator HICKS, JOHN
Permit No 230162
Date Issued 8/14/2013 Date Expires 8/14/2015

AS IV Serial no: 105447
Version no: 532B

TEST RECORD 00275

Temp Date Time 210L

Air Blank:
11/25/13 15:16 .000
Calibration Check:
22 11/25/13 15:16 .098

Subject Name

ACC Check
Subject I.D.

John Hicks
Operator Name, I.D.

230621 10/12/15
Location

405 E 5th

CALTRAC MO

64836

AS IV Serial no: 105447
Version no: 532B

TEST RECORD 00273

Temp Date Time 210L

Air Blank:
11/25/13 15:13 .000
Calibration Check:
21 11/25/13 15:13 .099

Subject Name

ACC Check
Subject I.D.

John Hicks
Operator Name, I.D.

230621 10/12/2015
Location

405 E 5th

CALTRAC MO

64836

AS IV Serial no: 105447
Version no: 532B

TEST RECORD 00271

Temp Date Time 210L

VOID: RFI
12 11/25/13 15:10

Subject Name

John Hicks
Subject I.D.

230621 11/01/15
Operator Name, I.D.

Location

405 E 5th

CALTRAC MO

64836

AS IV Serial no: 105447
Version no: 532B

TEST RECORD 00274

Temp Date Time 210L

Air Blank:
11/25/13 15:14 .000
Calibration Check:
21 11/25/13 15:14 .098

Subject Name

ACC Check
Subject I.D.

John Hicks
Operator Name, I.D.

230621 10/12/15
Location

405 E 5th

CALTRAC MO

64836